

USING YOUR OUT OF NETWORK INSURANCE BENEFITS FOR THERAPY

Step 1: Check Your Out-of-Network Benefits

Call the customer service number on the back of your insurance card and ask:

- Do I have out-of-network mental health coverage?
- Do I need to meet a deductible first?
- What percentage of the session fee is reimbursed?
- Are there any limits on the number of sessions per year?
- Is prior authorization required?

Step 2: Pay for Sessions and Request a Superbill

You will pay your therapist directly after each session. Upon request, your therapist can provide you with a superbill (an itemized receipt).

Step 3: Submit Your Superbill for Reimbursement

Each insurance company has its own process. Common submission options:

- Online portal (log in to your insurance account)
- Mail or fax (use your insurer's claim form)
- Third-party app (e.g., Reimbursify, Thrizer)

Attach the superbill and complete the required forms.

Step 4: Monitor Your Claim

Keep an eye out for an Explanation of Benefits (EOB), which shows how your claim was processed. You should receive payment directly from your insurance company if the claim is approved.

Helpful Tips

- Save all documents and EOBs for your records.
- Submit claims regularly (e.g., monthly).
- Reimbursement times vary—follow up if you haven't heard back in 30 days.
- Some clients find success using Mentaya simplify this process.

Talk to your therapist if you need help understanding your superbill or how to navigate your insurer's process.